Please type a plus sign (+) inside this box FEB 12

PTO/SB/121 (10-00) Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

uired to respond to a collection of information unless it displays a valid OMB control number. Under the Paperwork Reduction Act of

CORRESPONDENCE **ADDRESS** INDICATION FORM

than one signature is required, see below.*

forms are submitted.

 \boxtimes

*Total of

Address to:

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 RECEIVED FEB 2 0 2004

Direct all correspondence to: Place Customer Number Bar 冈 **Customer Number:** 23117 Label Here → OR Type Customer Number here Request for Customer Number (PTO/SB/125) submitted herewith. in the following listed application(s) or patent(s): U.S. Filing Patent Date Patent Number **Application Number** (if appropriate) Date (if appropriate) February 21, 2002 10/078.521 (check one) Typed or Applicant or Patentee Michelle N. Lester Printed Name Assignee of record of the entire Signature interest. Statement under 37 C.F.R. § 3.73(b) is enclosed. (Form Date February 12, 2004 PTO/SB/96) 1100 North Glebe Road, 8th Floor Attorney or Agent of record \boxtimes Address of signer: Arlington, VA 22202 32.331 (Reg. No.) NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS: SEND TO: Assistant Commissioner of Patents, Box CN, Washington, DC 20231.